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Fill in this information to identify your c		
United States Bankruptcy Court for the:  NORTHERN DISTRICT OF ILLINOIS		
Case number (if known):	Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13	Check if this is an amended filing

#### Official Form 101

#### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example,	William First Name	Kimberly First Name
	your driver's license or	J Middle Name	Middle Name
	passport).	Swiniuch	Swiniuch
	Bring your picture identification to your meeting	Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
All other names you     have used in the last 8	•	First Name	First Name
	years	Middle Name	Middle Name
	Include your married or	Middle Name	Middle Name
	maiden names.	Last Name	Last Name
3. Only the last 4 digits of your Social Security	Only the last 4 digits of your Social Security	xxx - xx - <u>3</u> <u>8</u> <u>8</u> <u>2</u>	xxx - xx - <u>8</u> <u>7</u> <u>3</u> <u>3</u>
	number or federal Individual Taxpayer	OR	OR
	Identification number	9xx - xx	9xx - xx

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		n J Swiniuch rly K Swiniuch	l			Cas	se number (if known	)	
			Ab	out Debtor 1:			About Debtor 2 (	Spouse Only i	n a Joint Case):
4.	Any business rand Employer	loyer		✓ I have not used any business names or EINs.			✓ I have not us	ed any busines	ss names or EINs.
		ou have used in	Bus	siness name			Business name		
	Include trade na	ames and	Bus	siness name			Business name		
	doing business	as names	Business name				Business name		
			EIN				EIN		<u> </u>
			EIN				EIN —		
5.	Where you live						If Debtor 2 lives a	ıt a different a	ddress:
			320	0 Oakdale Ave			204 E. Hawthor	ne Blvd.	
				mber Street			Number Street		
				undelein	IL	60060	Mundelein	IL	60060
			City		State	ZIP Code	City	State	ZIP Code
			Lal	<b>ke</b> unty			Lake County		
			ma	urt will send any r illing address.			will send any notic address.		
				mber Street			Number Street		
			P.O	). Box			P.O. Box		
			City	,	State	ZIP Code	City	State	ZIP Code
6.	Why you are ch	-	Ch	eck one:			Check one:		
	this district to the bankruptcy	file for	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.				Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
				I have another (See 28 U.S.C.		lain.	I have another (See 28 U.S.	er reason. Exp C. § 1408.)	lain.
Р	art 2: Tell	the Court Abo	out Y	<b>Ր</b> our Bankruբ	otcy Case				
7.	The chapter of Bankruptcy Co	de you					ce Required by 11 U age 1 and check the		
	are choosing to under	o tile	$\overline{\mathbf{V}}$	Chapter 7					
				Chapter 11					
				Chapter 12					
			П	Chapter 13					

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	otor 1 otor 2	William J Swiniuch Kimberly K Swiniu				Case num	ber (if known)			
8.	How yo	w you will pay the fee		court pay w	pay the entire fee when I file my pe for more details about how you may p vith cash, cashier's check, or money o If, your attorney may pay with a credit	oay. Typicall order. If your	y, if you are pay attorney is subr	ing the fee yourself, you may nitting your payment on your		
	1			I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).						
				By law than fee in	uest that my fee be waived (You maw, a judge may, but is not required to, 150% of the official poverty line that an installments). If you choose this opting Fee Waived (Official Form 103B) and	waive your f pplies to you ion, you mus	ee, and may do or family size and t fill out the App	so only if your income is less d you are unable to pay the		
bankr	•	e you filed for		No						
	last 8 y	ptcy within the ears?		Yes.						
			Dist	rict _		When		Case number		
		Dist	rict		When	MM / DD / YYYY	Case number			
			Dist	rict _		When		Case number		
							MM / DD / YYYY			
10.	-	/ bankruptcy bending or being		No						
	filed by	a spouse who is		Yes.						
		ng this case with by a business	Deb	otor			Relationsh	ip to you		
	partner	, or by an	Dist	rict _		When		Case number,		
	affiliate	9?					MM / DD / YYYY	if known		
			Deb	otor			Relationsh	ip to you		
			Dist	rict				Case number,		
			2.00				MM / DD / YYYY			
11.	Do you residen	rent your ace?		No. Yes.	Go to line 12. Has your landlord obtained an evicti	on judgment	against you?			
					No. Go to line 12.  Yes. Fill out Initial Statement A and file it as part of this bankru		-	Against You (Form 101A)		

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	tor 1 William J Swiniuch tor 2 Kimberly K Swiniuc	ch			Case nun	mber (if known)		
P	art 3: Report About Ar	ıy Bı	ısine	sses You Own as a	a Sole Proprietor			
12.	Are you a sole proprietor of any full- or part-time business?			Go to Part 4. Name and location of b	ousiness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Name of business, if any  Number Street				
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			Health Care Busi Single Asset Rea Stockbroker (as o	e box to describe your bustiness (as defined in 11 U.Sal Estate (as defined in 11 defined in 11 U.S.C. § 101 er (as defined in 11 U.S.C	S.C. § 101(27A)) U.S.C. § 101(51B)) (53A))	ZIP Cod	de
	Chapter 11 of the Bankruptcy Code and are you a <i>small business</i>	can mos	set ap st rece	propriate deadlines. If you	the court must know when you indicate that you are a nent of operations, cash-fl ot exist, follow the procedu	a small business de low statement, and f	btor, you federal ind	must attach your come tax return
	debtor?	$\overline{\mathbf{V}}$	No.	I am not filing under C	hapter 11.			
	For a definition of small business debtor, see		No.	I am filing under Chap the Bankruptcy Code.	ter 11, but I am NOT a sm	nall business debtor	according	g to the definition in
	11 U.S.C. § 101(51D).		Yes.	I am filing under Chap Bankruptcy Code.	ter 11 and I am a small bu	usiness debtor acco	rding to th	ne definition in the
P	Report If You Ov	vn oı	Hav	e Any Hazardous I	Property or Any Pro	perty That Need	ds Imm	ediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or		No Yes.	What is the hazard?				
	safety? Or do you own any property that needs immediate attention?			If immediate attention	is needed, why is it neede	ed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is the property?	? Number Street			
					City		State	ZIP Code

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Debtor 1	William J Swiniuch		
Debtor 2	Kimberly K Swiniuch	Case number (if known)	
Part 5:	Explain Your Efforts to Receive a Briefing About Cred	it Counseling	

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about

credit counseling because of:

☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
☐ Active duty.	I am currently on active military

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

duty in a military combat zone.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about	out
credit counseling because of:	

	=
☐ Incapacity.	I have a mental illness or a mental
_	deficiency that makes me
	incapable of realizing or making
	rational decisions about finances

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 18-17828 Doc 1 Filed 06/22/18 Entered 06/22/18 15:31:49 Desc Main Document Page 6 of 57

Debtor 1 William J Swiniuch Debtor 2 Kimberly K Swiniuch				Case number (if known)						
P	art 6:	Answer These Q	uesti	ions fo	r Reporting Pu	ırpos	ses			
16.	What ki have?	nd of debts do you	16a.	as "ind	-	dual p	sumer debts? Consumer de imarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."	
			16b.	money	•	-	iness debts? Business debarrent or through the operation		e debts that you incurred to obtain e business or investment.	
			16c.	State	the type of debts y	ou ow	e that are not consumer or bu	sines	s debts.	
17.	Are you Chapte	ı filing under r 7?		No. I	am not filing unde	r Chap	oter 7. Go to line 18.			
	any exe exclude adminis are paid availab	estimate that after empt property is ed and strative expenses d that funds will be le for distribution cured creditors?	$\square$	a	-	•	•	•	xempt property is excluded and to distribute to unsecured creditors?	
18.		any creditors do imate that you		1-49 50-99 100-199 200-999			1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000	
19.		uch do you e your assets to h?		\$100,00	000 1-\$100,000 01-\$500,000 01-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
20.		uch do you e your liabilities to		\$100,00	000 1-\$100,000 01-\$500,000 01-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	

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Debtor 1 Debtor 2	William J Swiniuch Kimberly K Swiniuc	1	Case number (if known)
Part 7:	Sign Below		
For you		I have examined this petition, and I declare under and correct.	r penalty of perjury that the information provided is true
		•	re that I may proceed, if eligible, under Chapter 7, 11, 12, d the relief available under each chapter, and I choose to
		If no attorney represents me and I did not pay or a fill out this document, I have obtained and read the	agree to pay someone who is not an attorney to help me le notice required by 11 U.S.C. § 342(b).
		I request relief in accordance with the chapter of t	title 11, United States Code, specified in this petition.
		•	g property, or obtaining money or property by fraud in nes up to \$250,000, or imprisonment for up to 20 years,
		X /s/ William J Swiniuch	X /s/ Kimberly K Swiniuch
		William J Swiniuch, Debtor 1	Kimberly K Swiniuch, Debtor 2
		Executed on <b>06/21/2018</b>	Executed on <b>06/21/2018</b>

MM / DD / YYYY

MM / DD / YYYY

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Debtor 2 Kimberly K Sw	iniuch Case number (if known)						
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.	I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.						
	X /s/ Kenneth S. Borcia Signature of Attorney for Debtor  Date 06/21/2018 MM / DD / YYYY						
	Kenneth S. Borcia Printed name						
	Kenneth S. Borcia & Associates Firm Name 1117 S. Milwaukee., Suite A-3						
	Number Street P.O. Box 447						
	Libertyville         IL         60048           City         State         ZIP Code						
	Contact phone (847) 634-8800 Email address						
	3125988						

Bar number

State

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Fill in this inf	formation to i	dentify your c	ase and this filing:		
Debtor 1	William First Name	J Middle Name	Swiniuch Last Name		
Debtor 2	Kimberly	K	Swiniuch		
(Spouse, if filing)		Middle Name	Last Name		
United States Ba	inkruptcy Court for	r the: <b>NORTHER</b>	RN DISTRICT OF ILLINOIS		
Case number (if known)				_	k if this is an ded filing
Official Form	ı 106A/B				
Schedule A	/B: Property	y			12/15
Part 1: De	escribe Each R	Residence, Bui	ges, write your name and case numl	state You Own or Have	
✓ No. Go	or have any legal to Part 2. here is the property		erest in any residence, building, land	ત્રે, or similar property <i>દ</i>	
	•	-	r all of your entries from Part 1, incl . Write that number here	_	\$0.00
Part 2: De	escribe Your V	ehicles			
•		•	est in any vehicles, whether they are icle, also report it on Schedule G: Exe	•	•
3. Cars, vans, to	rucks, tractors, s	sport utility vehicle	les, motorcycles		
☐ No ☑ Yes					
3.1. Make:	Dodge	<b>Who h</b> Check	has an interest in the property? k one.	Do not deduct secured clai amount of any secured clai	nims or exemptions. Put the aims on <i>Schedule D:</i>
Model:	Ram		Debtor 1 only	Creditors Who Have Claim	
Year:	2010	<b>_</b> D	Debtor 2 only	Current value of the	Current value of the
Approximate milea			Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other information:		L	at least one of the debtors and another	r <b>\$8,000.00</b>	\$8,000.00
2010 Dodge Rar miles)			Check if this is community property see instructions)		
4. Watercraft, a	•	•	other recreational vehicles, other vehicraft, fishing vessels, snowmobiles, n	•	
✓ No ☐ Yes		·	-	·	
	•	-	r all of your entries from Part 2, incl	•	\$8,000.00

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Debtor 1 Debtor 2		William J Swiniuch Kimberly K Swiniuch Case number (if known)							
P	art 3:	Describe Your Personal and Household Items							
Do	you own	or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.						
6.	Exampl No	old goods and furnishings es: Major appliances, furniture, linens, china, kitchenware							
	✓ Yes	Describe Bedroom furniture, kitchen & living room furniture, misc. household goods	\$800.00						
7.	Electro Exampl	nics es: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games							
	☐ No ✓ Yes	. Describe (2) televisions, laptop	\$1,000.00						
8.		ibles of value es: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles							
	✓ No ☐ Yes	. Describe							
9.		nent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments							
	✓ No ☐ Yes	s. Describe							
10.		ns es: Pistols, rifles, shotguns, ammunition, and related equipment							
	✓ No ☐ Yes	s. Describe							
11.	•	es: Everyday clothes, furs, leather coats, designer wear, shoes, accessories							
	☐ No ✓ Yes	. Describe clothing	\$40.00						
12.	Jewelry Exampl	es: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver							
	☐ No ✓ Yes	. Describe wedding rings and birthstone	\$100.00						
13.		m animals es: Dogs, cats, birds, horses							
	☐ No ✓ Yes	. Describe (1) dog	\$25.00						
14.	Any oth	ner personal and household items you did not already list, including any health aids you list							
	ш	. Give specific							
15		e dollar value of all of your entries from Part 3, including any entries for pages you have							
		d for Part 3. Write the number here	\$1,965.00						

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Debtor 1 Debtor 2		William J Swiniuch Kimberly K Swiniuch Case number (if known)						
P	art 4:	Describe Your Financial Assets						
Do	you own	n or have any legal or equitable interest in any of the	e following?	Current value of the portion you own? Do not deduct secured claims or exemptions.				
16.	Cash Exampl	les: Money you have in your wallet, in your home, in a petition	safe deposit box, and on hand when you file your					
	☐ No ✓ Yes	S	Cash:	\$50.00				
17.	-	its of money les: Checking, savings, or other financial accounts; ce brokerage houses, and other similar institutions. I institution, list each.	·					
	☐ No ✓ Yes	sInstitution name:						
	17	7.1. Checking account: Checking account -	First Midwest	\$200.00				
18.	Exampl	, mutual funds, or publicly traded stocks les: Bond funds, investment accounts with brokerage f	irms, money market accounts					
	✓ No ☐ Yes	s Institution or issuer name:						
19.	Non-pu	ublicly traded stock and interests in incorporated ar rest in an LLC, partnership, and joint venture	nd unincorporated businesses, including					
	✓ No ☐ Yes	s. Give specific ormation about						
		mName of entity:	% of ownership:					
20.	Negotia	nment and corporate bonds and other negotiable an able instruments include personal checks, cashiers' che egotiable instruments are those you cannot transfer to s	ecks, promissory notes, and money orders.					
	info	s. Give specific ormation about m Issuer name:						
21.		nent or pension accounts les: Interests in IRA, ERISA, Keogh, 401(k), 403(b), th profit-sharing plans	rift savings accounts, or other pension or					
		s. List each count separately. Type of account: Institution n	ame:					
22.	Your sh Example	ty deposits and prepayments hare of all unused deposits you have made so that you les: Agreements with landlords, prepaid rent, public uti hies, or others						
	✓ No		o or individual:					
23.	ш	s						
	✓ No		• •					

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	tor 1 tor 2	William J Swiniuch Kimberly K Swiniuch	1	Case number (if known)	
24.	26 U.S.	ts in an education IRA, i C. §§ 530(b)(1), 529A(b),	n an account in a qualified ABLE program and 529(b)(1).	ı, or under a qualified state tuition բ	orogram.
	✓ No	sInsti	tution name and description. Separately file	the records of any interests. 11 U.S.	C. § 521(c)
25.	Trusts,	equitable or future inte	rests in property (other than anything liste		
	powers No	exercisable for your be	nefit		
	Yes	s. Give specific ormation about them			
26.	Exampl		s, trade secrets, and other intellectual pro es, websites, proceeds from royalties and lice		
	✓ No	s. Give specific			
		rmation about them			
27.	Exampl	es, franchises, and othe les: Building permits, exc	r general intangibles lusive licenses, cooperative association hold	lings, liquor licenses, professional lice	enses
	✓ No	s. Give specific			
		rmation about them			
Mor	ney or pi	operty owed to you?			Current value of the
					portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you			
	<b>⋈</b> No	·			
	Yes	s. Give specific information		Fede	ral:
		out them, including whether already filed the returns	<b>⊝</b> Γ	State	:
	•	I the tax years		Local	:
29.	Family	support			
	•	es: Past due or lump sun	n alimony, spousal support, child support, ma	aintenance, divorce settlement, prope	erty settlement
	✓ No	s. Give specific information	on	Alimony:	
		•		Maintenance:	
				Support:	
				Divorce settleme	nt:
				Property settleme	ent:
30.	Other a	mounts someone owes	VOU		
		es: Unpaid wages, disab	ility insurance payments, disability benefits, s I Security benefits; unpaid loans you made to		
	☐ No ✓ Yes	s. Give specific information	on Disability Benefits		Unknown
31.		ts in insurance policies les: Health, disability, or I	ife insurance; health savings account (HSA);	credit, homeowner's, or renter's insu	rance
	□ No ✓ Yes	s. Name the insurance			
	con	npany of each policy I list its value	Company name:	Renefician <i>a</i>	Surrandar or refund value
	anc	i iisi iis value	Company name: health & life at work, no cash value	Beneficiary: Spouse	Surrender or refund value: \$0.00
				_ <del>chosso</del>	

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	otor 1 otor 2	William J Swiniuch Kimberly K Swiniuch	h	Case number (if known)	
			Whole life for Erica Swiniuch through State Farm	William & Kim Swiniuch	Unknown
			Renters & auto through State Farm		\$0.00
32.	If you a		s due you from someone who has died ing trust, expect proceeds from a life insurance use someone has died	policy, or are currently	
	✓ No ☐ Yes	s. Give specific informati	ion		
33.		•	whether or not you have filed a lawsuit or made ent disputes, insurance claims, or rights to sue	le a demand for payment	
	✓ No ☐ Yes	s. Describe each claim			
34.	rights t	contingent and unliquida to set off claims	ated claims of every nature, including counte	erclaims of the debtor and	
	✓ No Yes	s. Describe each claim			
35.	Any fin	ancial assets you did n	ot already list		
	✓ No ☐ Yes	s. Give specific informati	ion		
36.		-	our entries from Part 4, including any entries number here		\$250.00
Ρ	art 5:	Describe Any Busi	ness-Related Property You Own or H	lave an Interest In. List any	real estate in Part 1
37.	Do you	own or have any legal	or equitable interest in any business-related	property?	
	<u> </u>	Go to Part 6.			
	☐ Yes	s. Go to line 38.			
					Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accou	nts receivable or commi	issions you already earned		
	✓ No ☐ Yes	s. Describe			
39.		equipment, furnishings, les: Business-related cor desks, chairs, electro	mputers, software, modems, printers, copiers, fa	ıx machines, rugs, telephones,	
	✓ No ☐ Yes	s. Describe			
40.	Machir	ery, fixtures, equipmen	nt, supplies you use in business, and tools of	your trade	
	✓ No Yes	s. Describe			
41.	Invento	ory			
	✓ No	s. Describe			

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	tor 1 William J Swiniuch tor 2 Kimberly K Swiniuch Case number (if known)	
42.	Interests in partnerships or joint ventures	
	✓ No  ☐ Yes. Describe Name of entity:  % of ownership:	
43.	Customer lists, mailing lists, or other compilations	
	No  Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?  No  Yes. Describe	
44.	Any business-related property you did not already list	
	✓ No ☐ Yes. Give specific information.	
45.	Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here	\$0.00
Pa	Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an If you own or have an interest in farmland, list it in Part 1.	n Interest In.
46.	Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
	✓ No. Go to Part 7.  ☐ Yes. Go to line 47.	
47.	Farm animals	Current value of the portion you own? Do not deduct secured claims or exemptions.
	Examples: Livestock, poultry, farm-raised fish  No	
40	Yes	
48.	Cropseither growing or harvested	
	✓ No  Yes. Give specific information	
49.	Farm and fishing equipment, implements, machinery, fixtures, and tools of trade	
	✓ No  Yes	
50.	Farm and fishing supplies, chemicals, and feed	
	✓ No ☐ Yes	
51.	Any farm- and commercial fishing-related property you did not already list	
	✓ No  Yes. Give specific information	
52.	Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	\$0.00

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Debtor 1 Debtor 2		William J Swiniuch Kimberly K Swiniuch Case number (if known)							
Р	art 7:	Describe All Property You Own or Have an In	terest in That You D	oid Not List Above					
53.	-	u have other property of any kind you did not already list bles: Season tickets, country club membership	1?						
	✓ No	es. Give specific information.							
54.	Add th	ne dollar value of all of your entries from Part 7. Write tha	at number here	→	\$0.00				
Р	art 8:	List the Totals of Each Part of this Form							
55.	Part 1:	Total real estate, line 2		→	\$0.00				
56.	Part 2:	Total vehicles, line 5	\$8,000.00						
57.	Part 3:	Total personal and household items, line 15	\$1,965.00						
58.	Part 4:	Total financial assets, line 36	\$250.00						
59.	Part 5:	Total business-related property, line 45	\$0.00						
60.	Part 6:	Total farm- and fishing-related property, line 52	\$0.00						
61.	Part 7:	Total other property not listed, line 54	<b>\$0.00</b>						
62.	Total p	personal property. Add lines 56 through 61	\$10,215.00	Copy personal property total	+ \$10,215.00				
63.	Total c	of all property on Schedule A/B. Add line 55 + line 62			\$10,215.00				

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Fill in this inf	ormation to i				
Debtor 1	William	J	Swiniuch		
	First Name	Middle Name	Last Name		
Debtor 2	Kimberly	K	Swiniuch		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for		Check if this is an		
Case number					amended filing
(if known)					

#### Official Form 106C

#### Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

P	art 1:	Identify the Property You Cl	aim as Exempt			
1.	✓ Yo □ Yo	set of exemptions are you claiming? u are claiming state and federal nonba u are claiming federal exemptions. 11	nkruptcy exemptions. U.S.C. § 522(b)(2)	11 U.		·
2.	For any	property you list on Schedule A/B t	hat you claim as exer	npt, f	ill in the information b	pelow.
Brief description of the property and line on Schedule A/B that lists this property		Current value of Amount of the the portion you exemption you claim own			Specific laws that allow exemption	
Copy the value from Check only one box for Schedule A/B each exemption						
201 (1s	t exemp	tion: e Ram (approx. 34000 miles) etion claimed for this asset) hedule A/B:3.1	\$8,000.00		\$3,900.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)
201 (2n	d exem	tion: e Ram (approx. 34000 miles) ption claimed for this asset) hedule A/B:3.1	\$8,000.00		\$0.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

3.	Are you claiming a homestead exemption of more than \$160,375?						
	(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)						
	<ul> <li>✓ No</li> <li>Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?</li> <li>✓ No</li> <li>✓ Yes</li> </ul>						

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Debtor 1 William J Swiniuch Debtor 2 Kimberly K Swiniuch Case number (if known) Part 2: **Additional Page** Amount of the Brief description of the property and line on Current value of Specific laws that allow exemption exemption you claim Schedule A/B that lists this property the portion you own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$800.00 \$800.00 735 ILCS 5/12-1001(b)  $\overline{\mathbf{V}}$ Bedroom furniture, kitchen & living room 100% of fair market furniture, misc. household goods value, up to any applicable statutory Line from Schedule A/B: 6 limit Brief description: \$1,000.00 \$1,000.00 735 ILCS 5/12-1001(b)  $\square$ (2) televisions, laptop 100% of fair market value, up to any Line from Schedule A/B: 7 applicable statutory limit Brief description: \$40.00 735 ILCS 5/12-1001(a), (e) \$40.00  $\overline{\mathbf{Q}}$ clothing 100% of fair market value, up to any Line from Schedule A/B: 11 applicable statutory limit Brief description: \$100.00 \$100.00 735 ILCS 5/12-1001(b)  $\square$ wedding rings and birthstone 100% of fair market value, up to any Line from Schedule A/B: 12 applicable statutory limit Brief description: \$25.00 735 ILCS 5/12-1001(b) \$25.00  $\overline{\mathbf{Q}}$ (1) dog 100% of fair market value, up to any Line from Schedule A/B: 13 applicable statutory limit Brief description: \$50.00 \$50.00 735 ILCS 5/12-1001(b)  $\overline{\mathbf{Q}}$ Cash 100% of fair market value, up to any Line from Schedule A/B: 16 applicable statutory limit Brief description: 735 ILCS 5/12-1001(b) \$200.00  $\sqrt{\phantom{a}}$ \$200.00 **Checking account - First Midwest** 100% of fair market value, up to any Line from Schedule A/B: 17.1 applicable statutory limit Brief description: Unknown \$0.00 735 ILCS 5/12-1001(g)(1), (2), (3)  $\overline{\mathbf{V}}$ **Disability Benefits** 100% of fair market value, up to any Line from Schedule A/B: 30 applicable statutory limit

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Fill in this inf	ormation to identi	fy your case:				
Debtor 1	William	J	Swiniuch			
	First Name N	Middle Name	Last Name			
Debtor 2			Swiniuch			
(Spouse, if filing)	First Name N	Middle Name	Last Name			
United States Bar	nkruptcy Court for the: <u>I</u>	NORTHERN DISTR	RICT OF ILLINOIS	<u>s</u>		
Case number					☐ Check if this is	s an
(if known)					amended filing	
Official Form	106D					
Schedule D:	Creditors Who	Have Claims	Secured by	Property		12/15
correct informatio On the top of any  1. Do any credit  No. Che	nd accurate as possible on. If more space is ne additional pages, write tors have claims securate this box and submit to in all of the information	eded, copy the Addi e your name and cas ed by your property this form to the court v	itional Page, fill it on se number (if know	out, number the entri n).	es, and attach it to this	s form.
Part 1: Lis	t All Secured Clair	ns				
creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the			Column A  Amount of claim  Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
2.1		Describe the prop	•	\$4,100.00	\$8,000.00	
Capital One Auto	o Finance	- 2010 Dodge Rai				
Creditor's name P.O. Box 60511						
Number Street		_				
As of the date you file, the claim is: Check all that apply.  City of Industry CA 91716-0511  City State ZIP Code  Who owes the debt? Check one.  Debtor 1 only  As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed  Nature of lien. Check all that apply.						
	Debtor 2 only  Debtor 1 and Debtor 2 only  Debtor 1 and Debtor 2 only  Judgment lien from a lawsuit					
Check if this o			ng a right to offset)			
Date debt was inc	urred	Last 4 digits of ac	count number			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$4,100.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$4,100.00

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Fill in this inf	ormation to ide	entify your ca	ase:			
Debtor 1	William First Name	<b>J</b> Middle Name	Swiniuch Last Name			
Debtor 2 (Spouse, if filing)	Kimberly First Name	<b>K</b> Middle Name	Swiniuch Last Name			
United States Bar	nkruptcy Court for t	he: <b>NORTHER</b>	N DISTRICT OF ILLINOIS			
Case number (if known)					Check if this amended filir	
Official Form	106E/F			_		
Schedule E/	F: Creditors	Who Have	Unsecured Claims			12/15
on Schedule A/B: Do not include any If more space is n to this page. On t	Property (Official y creditors with pa eeded, copy the P he top of any addi	Form 106A/B) a artially secured art you need, fil tional pages, w	acts or unexpired leases that count on Schedule G: Executory Conclaims that are listed in Schedule II it out, number the entries in the rite your name and case number secured Claims	ontracts and Unexpire  on D: Creditors Who I  boxes on the left. I	ed Leases (Offic Hold Claims Sec	cial Form 106G). cured by Property.
1. Do any credit	tors have priority (	unsecured clain	ns against you?			
✓ No. Go t	to Part 2.					
Yes.						
claim. For ear show both price more space is	ch claim listed, ider ority and nonpriority	ntify what type of amounts. As m unsecured clain	creditor has more than one priority claim it is. If a claim has both prio luch as possible, list the claims in a ns, fill out the Continuation Page of	rity and nonpriority am alphabetical order acc	nounts, list that coording to the cree	laim here and ditor's name. If
(For an explar	nation of each type	of claim, see the	e instructions for this form in the ins			
				Total claim	Priority amount	Nonpriority amount
2.1						
Priority Creditor's Nam	ie		Last 4 digits of account number	. <u> </u>		
Number Street			When was the debt incurred?		_	
			As of the date you file, the claim	is: Check all that ap	ply.	
			Contingent Unliquidated			
City	State Z	IP Code	Disputed			
Who incurred the ☐ Debtor 1 only	debt? Check on	e.	Type of PRIORITY unsecured cl	aim:		
Debtor 2 only			Domestic support obligations Taxes and certain other debts	you owe the governn	nent	
Debtor 1 and D	Debtor 2 only the debtors and an	other	Claims for death or personal i	njury while you were		
ш	claim is for a comm		intoxicated  ☐ Other. Specify			
Is the claim subje	ct to offset?	-	<b>.</b> ,			
□ No □ Yes						

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Debtor 1 Debtor 2	William J Swiniuch Kimberly K Swiniuch	Case number (if known)
Part 2:	List All of Your NONPRIORITY	Y Unsecured Claims
4. List all	es  I of your nonpriority unsecured claims inditor has more than one nonpriority unsecuted in it is. Do not list claims already included.	claims against you?  Submit this form to the court with your other schedules.  In the alphabetical order of the creditor who holds each claim.  Ured claim, list the creditor separately for each claim. For each claim listed, identify what uded in Part 1. If more than one creditor holds a particular claim, list the other creditors in insecured claims, fill out the Continuation Page of Part 2.
Nonpriority Cr 525 W. Sy	I Inpatient Consultants, Inc. reditor's Name camore St. Street	\$570.00  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated
Debtor Debtor Debtor At least Check	State ZIP Code ed the debt? Check one. 1 only	Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify
Nonpriority Cr P.O. Box 3		\$949.00  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated
Debtor Debtor Debtor At least Check	State ZIP Code ed the debt? Check one. 1 only	Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify

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Debtor 1 Debtor 2	William J Swiniuch Kimberly K Swiniuch	Coop number (if Iranya)	
		Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listin	ng any entries on this page, number the page.	em sequentially from the	Total claim
4.3			\$50.00
	ystems Corp.	Last 4 digits of account number	
	Creditor's Name fer Dr.,Ste. 1	When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		Contingent Unliquidated	
		— ☐ Disputed	
Zion City	IL 60099 State ZIP Code	— (NONDRIGHTY )	
	red the debt? Check one.	Type of NONPRIORITY unsecured claim:	
☐ Debtor	r 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
ш	2 only	that you did not report as priority claims	
<b>≝</b>	r 1 and Debtor 2 only st one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
_		Other. Specify	
_	if this claim is for a community debt		
No No	m subject to offset?		
Yes			
Collecting	g for The Radiation Medicine		
4.4			£2.770.00
لببا		Lock A digita of account number	\$3,778.00
Capital O	Creditor's Name	Last 4 digits of account number	
P.O. Box	30281	When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
Colt I oko	City UT 84130-0281	Disputed	
Salt Lake City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incur	red the debt? Check one.	Student loans	
Debtor	•	Obligations arising out of a separation agreement or divorce	
$=$ $\sim$ $\sim$	r 2 only r 1 and Debtor 2 only	that you did not report as priority claims	
	st one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
_	if this claim is for a community debt	Other. Specify	
_	m subject to offset?		
✓ No	<b>,</b> <del></del>		
Yes			

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Debtor 1 Debtor 2	William J Swiniuch Kimberly K Swiniuch	Case number (if known)		
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page		
After listin	g any entries on this page, number the		Total claim	
	Services Treditor's Name Shington Street, Suite 201 Street	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated	\$1,333.00	
Waukegan IL 60085  City State ZIP Code  Who incurred the debt? Check one.  □ Debtor 1 only □ Debtor 2 only ☑ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt  Is the claim subject to offset? ☑ No □ Yes		Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify		
Choice R Nonpriority C P.O. Box Number	reditor's Name	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated	\$600.00	
Debtor Debtor Debtor Debtor At leas Check	State ZIP Code red the debt? Check one. 1 only	Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify		

Collecting for Septon Dermatology & Advanced Inpatient Consultan

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Debtor 1 William J Swiniuch Debtor 2 Kimberly K Swiniuch	Casa number (if known)	
Tamberly it of minutes	Case number (if known)	
Part 2: Your NONPRIORITY Unsecui	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.7		£4.550.00
Commonwealth Financial Systems	Last 4 digits of account number	\$1,550.00
Nonpriority Creditor's Name	When was the debt incurred?	
245 Main St. Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Dickson City PA 18519		
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?		
☑ No ☐ Yes		
Collecting for Infinity Healthcare		
4.8		\$95.00
Medical Business Bureau Nonpriority Creditor's Name	Last 4 digits of account number	
P.O. Box 1219	When was the debt incurred?  As of the date you file the claim is: Check all that apply	
Number Street	<ul> <li>As of the date you file, the claim is: Check all that apply.</li> <li>         ☐ Contingent     </li> </ul>	
	Unliquidated	
Park Ridge IL 60068-7219	Disputed	
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations arising out of a congration agreement or diverse	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	☑ Other. Specify	
Is the claim subject to offset?		
☑ No		
Yes		
Collecting for Park Ridge Anesthesiology		

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Debtor 1 William J Swiniuch Debtor 2 Kimberly K Swiniuch	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.9		\$75.00
Mundelein HighSchool	Last 4 digits of account number	
Nonpriority Creditor's Name P.O. Box 684	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Mundelein IL 60060		
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?  ✓ No		
Yes		
4.10		\$193.00
Murphy Ambulance Nonpriority Creditor's Name	Last 4 digits of account number	
P.O. Box 6990	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	— ☐ Disputed	
Libertyville         IL         60048-6990           City         State         ZIP Code		
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	☑ Other. Specify	
Is the claim subject to offset?   ✓ No		
Yes		
_ 		
4.11		\$27,293.00
Northshore University Healthsystem Nonpriority Creditor's Name	Last 4 digits of account number	
23056 Network Place	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Uniquidated ☐ Uniquida	
	— ☐ Disputed	
Chicago         IL         60673-1230           City         State         ZIP Code	Time of NONDDIODITY impossing delaims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:  Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
<ul><li>✓ Debtor 1 and Debtor 2 only</li><li>✓ At least one of the debtors and another</li></ul>	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	☑ Other. Specify	
Is the claim subject to offset?		
✓ No		
Yes		

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Debtor 1	William J Swiniuch		
Debtor 2	Kimberly K Swiniuch	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listin	g any entries on this page, number the page.	m sequentially from the	Total claim
4.12			\$250.00
Northsho		Last 4 digits of account number	
Nonpriority C <b>P.O. Box</b>	creditor's Name	When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		Contingent Unliquidated	
Manitowo	oc WI 54221	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incur  Debtor	red the debt? Check one.	☐ Student loans	
Debtor	•	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor	1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
<u> </u>	it one of the debtors and another	Other. Specify	
ш	if this claim is for a community debt n subject to offset?		
✓ No	ii subject to onset?		
Yes			
4.13			\$525.00
Receivab	le Management Partners	Last 4 digits of account number	Ψ323.00
Nonpriority C	reditor's Name	When was the debt incurred?	
Number	evon Ave., Ste. 245 Street	As of the date you file, the claim is: Check all that apply.	
		_ Contingent	
		☐ Unliquidated ☐ Disputed	
Des Plain	tes IL 60018-4521 State ZIP Code	— Turns of MONDRIADITY unassured eleiter	
	red the debt? Check one.	Type of NONPRIORITY unsecured claim:  Student loans	
Debtor		Obligations arising out of a separation agreement or divorce	
☐ Debtor ☐ Debtor	2 only 1 and Debtor 2 only	that you did not report as priority claims	
	at one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check	if this claim is for a community debt	E	
	n subject to offset?		
✓ No ☐ Yes			
_	g for Murphy Ambulance, plus othe	ers	

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Debtor 1 Debtor 2	William J Swiniuch Kimberly K Swiniuch		
200101 2	Kimberry R Swiniach	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listin	ng any entries on this page, number the page.	em sequentially from the	Total claim
4.14			\$11,340.00
	Acceptance Corp.	Last 4 digits of account number	<del></del>
	Creditor's Name	When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
		☐ Unliquidated ☐ ☐ Disputed	
Greenville			
City Who incur	State ZIP Code red the debt? Check one.	Type of NONPRIORITY unsecured claim:	
☐ Debtor		Student loans  Obligations origing out of a congration agreement or diverse	
Debtor	2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
≌	1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
_	st one of the debtors and another	☑ Other. Specify	
_	if this claim is for a community debt		
	m subject to offset?		
✓ No ☐ Yes			
4.15			\$52.00
	llection Service	Last 4 digits of account number	
	Creditor's Name Stoughton Rd.	When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		_ Contingent	
		☐ Unliquidated ☐ ☐ Disputed	
Madison	WI 53716		
City Who incur	State ZIP Code red the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor		Student loans	
Debtor	•	Obligations arising out of a separation agreement or divorce	
□ Debtor	r 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
☐ At leas	st one of the debtors and another	Other. Specify	
☐ Check	if this claim is for a community debt		
	m subject to offset?		
✓ No ☐ Yes			
<del></del>	g for IHC-Libertyville Emergency P	hy	

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Debtor 1 Debtor 2	William J Swiniuch Kimberly K Swiniuch	Case number (if known)	Case number (if known)		
Part 2:	Part 2: Your NONPRIORITY Unsecured Claims Continuation Page				
After listing previous p	g any entries on this page, number the age.	m sequentially from the	Total claim		
State Farm Nonpriority Creditor's Name P.O. Box 2329 Number Street		Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent			
Bloomington  City State ZIP Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes		Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify			

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Debtor 2 Kimber	rly K Swiniuc	:h				Case	e number (if known)
Part 3: List (	Others to Be	e Notified Abou	ıt a Del	ot Tha	at You Already	y Li:	sted
For example, if creditor in Parts debts that you I	a collection ag s 1 or 2, then l isted in Parts	gency is trying to o	collect frogency he itional cr	om you ere. Si editors	u for a debt you o milarly, if you ha	owe ave n	bbt that you already listed in Parts 1 or 2. to someone else, list the original nore than one creditor for any of the have additional parties to be notified for
David Axelrod & A	ssoc.		On w	hich en	ntry in Part 1 or F	Part 2	2 did you list the original creditor?
<sub>Name</sub> 1448 Old Skokie R	oad		Line	4.5	of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number Street			_		_	$\overline{\mathbf{V}}$	Part 2: Creditors with Nonpriority Unsecured Claims
			 Last 4	l diaits	of account num	ber	
Highland Park City	IL State	<b>60035</b> ZIP Code	_	. a.g.to			
Harris & Harris			On w	hich en	ntry in Part 1 or F	Part 2	2 did you list the original creditor?
<sup>Name</sup> 111 W. Jackson Bl	lvd.,Ste. 400		Line		of (Check one):	П	Part 1: Creditors with Priority Unsecured Claims
Number Street	,				_		Part 2: Creditors with Nonpriority Unsecured Claims
			─				
Chicago	IL	60604	_				
City  Collecting for Nort	State thshore	ZIP Code					
Lake County Head	d & Neck Spe	ecialists	_ On w	hich en	ntry in Part 1 or F	Part 2	2 did you list the original creditor?
222 S. Greenleaf, #	<b>#106</b>		Line		of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number Street			_				Part 2: Creditors with Nonpriority Unsecured Claims
			– Last 4	l digits	of account num	ber	
Gurnee	IL	60031	_	. J			
City	State	ZIP Code					
ReceivableManage	ement Servic	es	On w	hich en	ntry in Part 1 or F	art 2	2 did you list the original creditor?
Name <b>P.O. Box 361598</b>			Line		of (Check one):	П	Part 1: Creditors with Priority Unsecured Claims
Number Street					_		Part 2: Creditors with Nonpriority Unsecured Claims
			— — last4	l dinite	of account num	her	
Columbus	ОН	43236	_	digito	or account man	<b>D</b> C1	<del></del>
City Collecting for Stat	State e Farm Insur	ZIP Code ance					
Recovery Manage	ment Serv.		On w	hich en	ntry in Part 1 or F	Part 2	2 did you list the original creditor?
Name <b>P.O. Box 857</b>			_		-		
Number Street			LINE _		or (Grieck Grie):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
			_			Ц	Tart 2. Ordanors with reoriphority offsecured Olainis
14/			- Last 4	digits	of account num	ber	<u> </u>
<b>Warrenville</b> City	IL State	<b>60555-0857</b> ZIP Code	_				

Debtor 1

William J Swiniuch

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Debtor 1 Debtor 2	William J Swiniuch Kimberly K Swiniuch	Case number (if known)
Part 3:	List Others to Be Notified Abo	out a Debt That You Already Listed Continuation Page
Weltman Weinberg & Reis Co.,		On which entry in Part 1 or Part 2 did you list the original creditor?
Name 180 N. La Number	Salle St.,Ste. 2400 Street	Line of (Check one):
Chicago	IL 60601 State ZIP Code	— Last 4 digits of account number

**Collecting for Regional Acceptance** 

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Deptor 1	William J Swiniuch	
Debtor 2	Kimberly K Swiniuch	Case number (if known)
		· · · · · · · · · · · · · · · · · · ·

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
nomi art i	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	<sup>6d.</sup> <b>+</b>	\$0.00
	6e.	<b>Total.</b> Add lines 6a through 6d.	6d.	\$0.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. <b>+</b>	\$49,254.00
	6j.	<b>Total.</b> Add lines 6f through 6i.	6j.	\$49,254.00

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Fill in this inf	ormation to iden								
Debtor 1	William First Name	J Middle Name	Swiniuch Last Name						
Debtor 2	Kimberly	K	Swiniuch						
(Spouse, if filing)		Middle Name	Last Name						
United States Bar	United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS								
Case number				l ,	☐ Check if this is an				
(if known)			amended filing						

#### Official Form 106G

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

    Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease
  is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of
  executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fill in this in	nformation to i	dentify your case	:	
Debtor 1	William	J	Swiniuch	
	First Name	Middle Name	Last Name	
Debtor 2	Kimberly	K	Swiniuch	
(Spouse, if filing	g) First Name	Middle Name	Last Name	
United States B	Sankruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS	
Case number				
(if known)				Check if this is an amended filing
				-
Official Forr	m 106H			
Schedule F	d: Your Cod	ebtors		1
nage. On the to  1. Do you hav  No Yes	p of any Addition: e any codebtors?	al Pages, write your n	ame and case number (if known int case, do not list either spous	se as a codebtor.)
include Arizo		•		? (Community property states and territories as, Washington, and Wisconsin.)
Yes. D	0	rmer spouse, or legal e	quivalent live with you at the tim	ne?
person sho creditor on	wn in line 2 again Schedule D (Offic	as a codebtor only if	that person is a guarantor or edule E/F (Official Form 106E/I	or if your spouse is filing with you. List the cosigner. Make sure you have listed the F), or <i>Schedule G</i> (Official Form 106G). Use

Column 1: Your codebtor Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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Fill in this informa	ation to identify	y your case:					
Debtor 1	William	J	Swiniuch				
•	First Name	Middle Name	Last Name	Che	eck if this is:		
Debtor 2	Kimberly	K	Swiniuch		An amended filing		
(Spouse, if filing)	First Name	Middle Name	Last Name	_  ⊔	All amended ming		
United States Bankruptcy Court for the:		NORTHERN DISTRICT OF ILLINOIS		_  🗆	A supplement showing postpetition chapter 13 income as of the following dat		
Case number (if known)					MM / DD / YYYY		

#### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Describe	<b>Employment</b>
ган.	Describe	LIIIDIOVIIIGIIL

1.	Fill in your employment information.		Debto	or 1			Debtor 2 or no	n-filing spou	se
	If you have more than one job, attach a separate page with information about additional employers.	Employment status  Occupation		Employed Not employed			Employed  Not emplo		
	Include part-time, seasonal, or self-employed work.	Employer's name					Home Depot		
	Occupation may include student or homemaker, if it applies.	Employer's address	Numbe	er Street			2455 Paces F Number Street	Ferry Rd.	
			City		State	Zip Code	Atlanta City	<b>GA</b> State	<b>30339</b> Zip Code
		How long employed the	•			_			_

#### Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

5. For Debtor 1 For Debtor 2 or non-filling spouse

2. \$0.00 \$2,881.67

\$0.00 \$0.00

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Debt Debt	otor 1 William J Swiniuch tor 2 Kimberly K Swiniuch		Case nu	ımber (if knov	vn)		
			For Debtor 1	For Debt			
	Copy line 4 here	<b>→</b> 4.	\$0.00	\$2,8	81.67		
	List all payroll deductions:		40.00	•	40.45		
	5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00	\$3	\$40.45		
	5b. Mandatory contributions for retirement plans	5b.	\$0.00		\$0.00		
	5c. Voluntary contributions for retirement plans	5c.	\$0.00		\$0.00		
	5d. Required repayments of retirement fund loans	5d.	\$0.00	<u> </u>	\$0.00		
	5e. Insurance	5e.	\$0.00 \$0.00	<u> </u>	\$0.00		
	5f. Domestic support obligations	5f.	\$0.00		\$0.00		
	5g. Union dues 5h. Other deductions.	5g.	φυ.υυ		φυ.υυ		
	Specify:	5h. <b>-</b>	\$0.00		\$0.00		
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$ .	+ 6.	\$0.00	\$1,5	06.98		
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4	4. 7.	\$0.00	\$1,3	74.69		
8.	List all other income regularly received:						
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00		\$0.00		
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.						
	8b. Interest and dividends	8b.	\$0.00		\$0.00		
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00		\$0.00		
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.						
	8d. Unemployment compensation	8d.	\$0.00		\$0.00		
	8e. Social Security	8e.	\$1,887.00		\$0.00		
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.						
	Specify:	8f.	\$0.00		\$0.00		
	8g. Pension or retirement income	8g.	\$0.00		\$0.00		
	8h. Other monthly income.  Specify:	8h. <b>.</b>	<b>#0.00</b>		<b>¢0.00</b>		
	Specify.		\$0.00	,	\$0.00		
9.	<b>Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h	n. 9.	\$1,887.00		\$0.00		
	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10. e.	\$1,887.00	+\$1,3	374.69	=\$3,	,261.69
	State all other regular contributions to the expenses that you list in Include contributions from an unmarried partner, members of your hous friends or relatives.			our roommate	s, and oth	er	
	Do not include any amounts already included in lines 2-10 or amounts t	hat are r	not available to pay	expenses lis	ted in Sch	nedule J.	
	Specify:				_ 11.	+	\$0.00
	Add the amount in the last column of line 10 to the amount in line 1 income. Write that amount on the Summary of Your Assets and Liabilit				12.	\$3,	,261.69
	if it applies.  Do you expect an increase or decrease within the year after you file	a this fo	rm?				/ income
	No. None.	- ins 10					
	Yes. Explain:						

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Ī	ill in this inform	nation to iden	tify your case:			Cha	ck if this	ia.	
	Debtor 1	William First Name	<b>J</b> Middle Name	Swinit Last Nan			An ame	ended filing ement showing	nostnatition
	Debtor 2 (Spouse, if filing)	Kimberly First Name	<b>K</b> Middle Name	Swinit Last Nan				13 expenses a	
	United States Bankı	ruptcy Court for th	e: NORTHERN DIS	STRICT OF	ILLINOIS		MM / DI	D / YYYY	<u> </u>
	Case number (if known)						IVIIVI / DI	D/ 1111	
	fficial Form 10	)6J				J			
	chedule J: Yo		es						12/15
nai	rrect information. I	f more space is i	ble. If two married pe needed, attach anothe nswer every question.	-		-	-		
1.	Is this a joint cas		5011010						
2.	No. Go to lin  ✓ Yes. <b>Does</b> D  ✓ No	e 2.  Debtor 2 live in a  s. Debtor 2 must  endents?		ormation	for Separate Housel  Dependent's relation  Debtor 1 or Debtor	onshij		2.  Dependent's age	Does dependent live with you?
	Debtor 2.		for each dependent.		child			23 yrs.	□ No
	Do not state the donames.	ependents'							- ☑ Yes
3.	Do your expense expenses of peopyourself and you	ole other than	✓ No ☐ Yes						_
P	Part 2: Estima	ate Your Ongo	oing Monthly Expe	enses					
to		of a date after th	nkruptcy filing date ur ne bankruptcy is filed.						
			sh government assist on Schedule I: Your In	•				Your expens	ses
4.		•	penses for your resided				4	4	\$1,200.00
	If not included in	line 4:							
	4a. Real estate ta	axes					4	ła	
	4b. Property, hon	neowner's, or rent	ter's insurance				4	łb	
	4c. Home mainte	enance, repair, an	d upkeep expenses				4	łc	
	4d Homeowner's	s association or co	andominium dues				1	ld	

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	otor 1 William J Swiniuch otor 2 Kimberly K Swiniuch	Case number (if known)	
		Your expenses	
5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$275.00
	6b. Water, sewer, garbage collection	6b.	\$65.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$210.00
	6d. Other. Specify:	6d.	
7.	Food and housekeeping supplies	7.	\$400.00
8.	Childcare and children's education costs	8.	
9.	Clothing, laundry, and dry cleaning	9.	\$80.00
10.	Personal care products and services	10.	\$60.00
11.	Medical and dental expenses	11.	\$80.00
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$290.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$25.00
14.	Charitable contributions and religious donations	14.	
15.	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a	
	15b. Health insurance	15b	
	15c. Vehicle insurance	15c	\$145.00
	15d. Other insurance. Specify:	15d.	
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	
17.	Installment or lease payments:		_
	17a. Car payments for Vehicle 1	17a.	\$392.00
	17b. Car payments for Vehicle 2	17b.	
	17c. Other. Specify:	17c	
	17d. Other. Specify:		
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19.	Other payments you make to support others who do not live with you.  Specify:	19.	

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	otor 1 otor 2	William J Swiniuch Kimberly K Swiniuch	Case number (if known	ı)
20.		r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a.	
	20b.	Real estate taxes	20b.	
	20c.	Property, homeowner's, or renter's insurance	20c.	
	20d.	Maintenance, repair, and upkeep expenses	20d.	
	20e.	Homeowner's association or condominium dues	20e.	
21.	Other	r. Specify:	21. +	•
22.	Calcu	ulate your monthly expenses.	_	
	22a.	Add lines 4 through 21.	22a.	\$3,222.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b.	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$3,222.00
23.	Calcu	ulate your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$3,261.69
	23b.	Copy your monthly expenses from line 22c above.	23b. <b>_</b>	\$3,222.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	\$39.69
24.	Do yo	ou expect an increase or decrease in your expenses within the year after you	ı file this form?	
		xample, do you expect to finish paying for your car loan within the year or do you elent to increase or decrease because of a modification to the terms of your mortga	. ,	
	_	No. Yes. Explain here: None.		

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Fill in this inf	ormation to id							
Debtor 1	William	J	Swiniuch					
	First Name	Middle Name	Last Name					
Debtor 2	Kimberly	K	Swiniuch					
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS								
Case number					Check if this is a			
(if known)					amended filing			

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

P	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$10,215.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$10,215.00
P	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$4,100.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+\$49,254.00
	Your total liabilities	\$53,354.00
<b>P</b>	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$3,261.69
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	¢2 222 00

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Debtor 1 Debtor 2		William J Swiniuch Kimberly K Swiniuch	Case number (if known)	
Р	art 4:	Answer These Questions for Administrative and Statistic	cal Records	
6.	Are yo	u filing for bankruptcy under Chapters 7, 11, or 13?		
	□ No	<ul> <li>You have nothing to report on this part of the form. Check this box and su</li> </ul>	ubmit this form to the court with your other schedules.	
7.	What k	ind of debt do you have?		
		our debts are primarily consumer debts. Consumer debts are those "incur mily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statist		
		our debts are not primarily consumer debts. You have nothing to report or s form to the court with your other schedules.	on this part of the form. Check this box and submit	
8.		he <b>Statement of Your Current Monthly Income:</b> Copy your total current mo Form 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.	onthly income from \$2,823.17	, _
9.	Copy t	he following special categories of claims from Part 4, line 6 of Schedule	e E/F:	
			Total claim	
	From F	Part 4 on Schedule E/F, copy the following:		
	9a. Do	omestic support obligations. (Copy line 6a.)	\$0.00	
	9b. Ta	ixes and certain other debts you owe the government. (Copy line 6b.)	\$0.00	
	9c. Cl	aims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00	
	9d. St	udent loans. (Copy line 6f.)	\$0.00	
		oligations arising out of a separation agreement or divorce that you did not report or the control of the contr	eport as <b>\$0.00</b>	

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$0.00

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Fill in this information to identify your case:								
William	J	Swiniuch						
First Name	Middle Name	Last Name						
Kimberly	K	Swiniuch						
First Name	Middle Name	Last Name						
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS  Case number								
			☐ Check amen					
	William First Name Kimberly First Name	William J First Name Middle Name  Kimberly K First Name Middle Name	William     J     Swiniuch       First Name     Middle Name     Last Name       Kimberly     K     Swiniuch       First Name     Middle Name     Last Name					

#### Official Form 106Dec

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below								
Did you pay or agree to pay someone who	is NOT an attorney to help you fill out bankruptcy forms?							
<b>☑</b> No								
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).							
Under penalty of perjury, I declare that I have true and correct.	Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.							
X /s/ William J Swiniuch William J Swiniuch, Debtor 1	X /s/ Kimberly K Swiniuch Kimberly K Swiniuch, Debtor 2							
Date <u>06/21/2018</u> MM / DD / YYYY	Date 06/21/2018 MM / DD / YYYY							

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Debtor 1	William	J		Swiniuch			
	First Name	Middle Nam	e	Last Name			
Debtor 2 Spouse, if filing)	Kimberly	K Middle Nam		Swiniuch Last Name			
spouse, ii iiiiiig)	) First Name	Middle Main	le	Last Name			
Inited States Ba	ankruptcy Court for	the: NORTHE	RN DIST	RICT OF IL	LINOIS		
Case number f known)	_					Check if amende	this is an d filing
fficial Form	n 107						
	<del></del>	Affaire for	r Indivi	duale Ei	ling for Bankru	atov	04/16
tatement c	or i manoiai	Andria io	maivi	addi5 i i	inig for Bankra	otoy	0-1/10
✓ Married	current marital st	atus?					
☐ Not marri  During the la							
•	st 3 years, have y	ou lived anyw	here othe	r than where	e you live now?		
	all of the places yo	ou lived in the I	ast 3 years	s. Do not inc	lude where you live now.		
Debtor 1:				Debtor 1	Debtor 2:		Dates Debtor 2 lived there
					✓ Same as Debtor	1	Same as Debtor
			From	2016			From
204 F. H	awthorne Blvd.						
	awthorne Blvd. Street			2018	Number Street		
				2018	Number Street		To
Number	Street	60060	To	2018	Number Street		
	Street	60060	To	2018	Number Street		_

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Debtor 1 William J Swiniuch Debtor 2 Kimberly K Swiniuch				Case nur	mber (if known)	
Ρ	art 2:	Explain the Sources of	Your Income			
4.	Did you Fill in th	I have any income from employ the total amount of income you rec tre filing a joint case and you have	rment or from operating a b eived from all jobs and all bu	sinesses, including par	t-time activities.	alendar years?
	□ No ✓ Yes	s. Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	<b>Gross income</b> (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
		ry 1 of the current year until ı filed for bankruptcy:	Wages, commissions, bonuses, tips		₩ Wages, commissions, bonuses, tips	\$16,860.00 (est.)
			Operating a business		Operating a business	
		calendar year:	☐ Wages, commissions, bonuses, tips		₩ Wages, commissions, bonuses, tips	\$24,384.00
(Jai	nuary 1 to	December 31, <u>2017</u> )	Operating a business		Operating a business	
		ndar year before that:	₩ages, commissions, bonuses, tips	\$35,000.00 (est.)	₩ Wages, commissions, bonuses, tips	
(Jai	nuary 1 to	December 31, 2016 )	Operating a business		Operating a business	
5.	Include unempl	a receive any other income duri income regardless of whether that oyment; and other public benefit publing and lottery winnings. If you 1.	at income is taxable. Exampl payments; pensions; rental in	es of other income are come; interest; dividen	ds; money collected from la	awsuits; royalties;
	List eac	th source and the gross income fr	rom each source separately.	Do not include income	that you listed in line 4.	
	□ No ✓ Yes	s. Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions
Fro	m Janua	ry 1 of the current year until	Disability	\$11,322.00		
		i filed for bankruptcy:	snowplowing	\$2,500.00		
_			Disability	\$22,644.00		
		calendar year:  December 31, 2017 )  YYYYY	snowplowing	\$3,000.00		
		ndar year before that:  December 31, 2016 )	snowplowing	\$3,000.00		
Jäl	iuary i to	7 December 31, 2016 )				

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Debtor 1 Debtor 2		William J Swiniuch Kimberly K Swiniu				Case number (if kno	wn)
P	art 3:	List Certain Pay	ments You Ma	de Before \	ou Filed for Ba	nkruptcy	
6.	Are eith	ner Debtor 1's or Debt	or 2's debts prima	rily consume	r debts?		
	□ No.	Neither Debtor 1 no	-	-			d in 11 U.S.C. § 101(8) as
		During the 90 days	before you filed for	bankruptcy, di	d you pay any credit	tor a total of \$6,425*	or more?
		☐ No. Go to line 7					
		total amou	nt you paid that cre	editor. Do not i	nclude payments for	nore in one or more or domestic support of attorney for this ban	bligations, such as
		* Subject to adjustm	ent on 4/01/19 and	d every 3 years	after that for cases	filed on or after the	date of adjustment.
	<b>▼</b> Yes	During the 90 days ☐  No. Go to line 7  Yes. List below creditor. □	before you filed for  each creditor to who not include payn	bankruptcy, di nom you paid a nents for dome	d you pay any credit	ons, such as child su	unt you paid that
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Creditor's name P.O. Box 60511 Number Street			\$4,100 \$392.00 per month		\$4,100.00	<ul> <li>Mortgage</li> <li>Car</li> <li>Credit card</li> <li>Loan repayment</li> <li>Suppliers or vendors</li> </ul>	
-	y of Indu		91716-0511	_			Other
City 7.	Insiders corporar agent, it such as	s include your relatives; tions of which you are a	I for bankruptcy, of any general partner an officer, director, ness you operate a ony.	ers; relatives of person in cont	f any general partne rol, or owner of 20%	rs; partnerships of w or more of their voti	e who was an insider? hich you are a general partner; ng securities; and any managing s for domestic support obligations

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	William J Swiniuch Kimberly K Swiniuch	1		Case number	r (if known)		
	year before you filed fo d an insider?	or bankruptcy, d	id you make any payme	nts or transfer any p	roperty on acco	unt of a dek	ot that
Include p	payments on debts guara	inteed or cosigne	d by an insider.				
✓ No ☐ Yes.	List all payments that b	enefited an inside	er.				
Part 4:	Identify Legal Act	ions, Reposs	essions, and Forec	losures			
List all su	•	ersonal injury case	vere you a party in any la es, small claims actions,			•	-
□ No ☑ Yes.	Fill in the details.						
Case title		Nature of the o	case	Court or agency		Statu	s of the case
Regional Ad	cceptance Corp	Collection		CC of the 19th	Judicial Lake C	ounty	Pending
				Court Name			☐ On appeal
Case number	18AR196			Number Street			☐ Concluded
odoo namboi	TOAKTOO	_		Woulsean			
				Waukegan City		<b>0085</b> P Code	
Case title		Nature of the o	2250	Court or agency		Statu	s of the case
	rvices, et al	Collection	Just .	CC of the 19th	Judical, Lake C		
				Court Name			Pending
				Number Street			On appeal
Case number	18SC2852	_					Concluded
				0::	0		
seized, o	year before you filed for levied? I that apply and fill in the		as any of your property	City repossessed, forecl		P Code	
□ No	Go to line 11.						
	Fill in the information be	elow.					
_			Describe the property		Date	Value /	of the property
Regional Ad	cceptance Corp.		2016 Jeep		2017		,
Creditor's Name			-				
1424E East Number Stre	Fire Tower Rd.		Explain what happene	ed			
20			✓ Property was repos				
			Property was forecl				
Greenville City	NC State	<b>27858</b> ZIP Code	Property was garnis	shed. ned, seized, or levied.			

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	otor 1 otor 2	William J Kimberly				Case numbe	er (if known)	
11.		-	-			or, including a bank or financ cause you owed a debt?	cial institution, set off an	у
	☑ No □ Yes	s. Fill in the	details.					
12.		-	-		iptcy, was any of your custodian, or another	property in the possession official?	of an assignee for the be	enefit of
	✓ No ☐ Yes	S						
P	art 5:	List Ce	rtain G	ifts and Co	ntributions			
13.	Within	2 years bef	ore you	filed for bankr	uptcy, did you give ar	ny gifts with a total value of n	nore than \$600 per perso	on?
	✓ No ☐ Yes	s. Fill in the	details f	or each gift.				
14.		2 years before the contract 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ore you	filed for bankr	uptcy, did you give ar	ny gifts or contributions with	a total value of more tha	an \$600
	☑ No □ Yes	s. Fill in the	details f	or each gift or o	contribution.			
P	art 6:	List Ce	rtain L	osses				
15.		1 year befo isaster, or g	-		uptcy or since you file	d for bankruptcy, did you los	e anything because of the	neft, fire,
	✓ No ☐ Yes	s. Fill in the	details.					
P	art 7:	List Ce	rtain P	ayments or	Transfers			
16.		-	-			ne else acting on your behalt a bankruptcy petition?	f pay or transfer any pro	perty to
	•	-		_		nseling agencies for services i	required for your bankrupt	су.
	□ No ☑ Yes	s. Fill in the	details.					
	nneth S	. Borcia &	Associ	ates	Description and val	ue of any property transferre	ed Date payment or transfer was made	Amount of payment
		lwaukee, S	Suite A-	3	_		06/14/2018	\$35.00
Num	nber Str	eei			_			
Lib	ertyville	9	IL	60048				
City	.,		State	ZIP Code	_			
Ema	il or websi	te address			_			
Pers	on Who M	lade the Paym	ent if Not	You	_			

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Deb Deb	tor 1 William J Swiniuch tor 2 Kimberly K Swiniuch	Case number (if	known)	
	cket Debt Counseling	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
		_	06/8/2018	\$24.00
Num	ber Street	_		
		_		_
City	State ZIP Code	_		
Emai	il or website address	_		
Perso	on Who Made the Payment, if Not You	_		
17.	•	uptcy, did you or anyone else acting on your behalf pay with your creditors or to make payments to your credit		perty to
	Do not include any payment or transfer that	at you listed on line 16.		
	✓ No ☐ Yes. Fill in the details.			
18.		ruptcy, did you sell, trade, or otherwise transfer any pr irse of your business or financial affairs?	operty to anyone, ot	her than
	Include both outright transfers and transfer Do not include gifts and transfers that you	rs made as security (such as granting of a security interest have already listed on this statement.	or mortgage on your	property).
	✓ No  Yes. Fill in the details.			
19.	Within 10 years before you filed for bank you are a beneficiary? (These are ofte	kruptcy, did you transfer any property to a self-settled n called asset-protection devices.)	trust or similar devic	ce of which
	✓ No ☐ Yes. Fill in the details.			
Pa	art 8: List Certain Financial Ac	counts, Instruments, Safe Deposit Boxes, an	d Storage Units	
20.	Within 1 year before you filed for bankru benefit, closed, sold, moved, or transfer	uptcy, were any financial accounts or instruments held	in your name, or for	your
	Include checking, savings, money market, houses, pension funds, cooperatives, asso	or other financial accounts; certificates of deposit; shares ociations, and other financial institutions.	in banks, credit unior	ns, brokerage
	✓ No  Yes. Fill in the details.			

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	otor 1 otor 2	William J Swiniuch Kimberly K Swiniuch	Case number (if known)		
21.	. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?				
	✓ No ☐ Yes	es. Fill in the details.			
22.	<b>☑</b> No	you stored property in a storage unit or place other than your home with os. Fill in the details.	in 1 year before you filed for bankruptcy?		
Р	art 9:	Identify Property You Hold or Control for Someone Else			
23.	-	u hold or control any property that someone else owns? Include any prod in trust for someone.	operty you borrowed from, are storing for,		
	✓ No ☐ Yes	es. Fill in the details.			
P	art 10:	Give Details About Environmental Information			
For	the pur	pose of Part 10, the following definitions apply:			
	hazardo	nmental law means any federal, state, or local statute or regulation concerns or toxic substance, wastes, or material into the air, land, soil, surfacting statutes or regulations controlling the cleanup of these substances, w	water, groundwater, or other medium,		
		ans any location, facility, or property as defined under any environment or used to own, operate, or utilize it, including disposal sites.	al law, whether you now own, operate, or		
		ous material means anything an environmental law defines as a hazardonce, hazardous material, pollutant, contaminant, or similar item.	us waste, hazardous substance, toxic		
Rep	ort all n	notices, releases, and proceedings that you know about, regardless of w	hen they occurred.		
24.	Has an law?	ny governmental unit notified you that you may be liable or potentially lia	ble under or in violation of an environmental		
	✓ No ☐ Yes	es. Fill in the details.			
25.		you notified any governmental unit of any release of hazardous material	,		
	✓ No ☐ Ye	es. Fill in the details.			
26.	Have y orders	you been a party in any judicial or administrative proceeding under any o s.	environmental law? Include settlements and		
	✓ No ☐ Yes	es. Fill in the details.			

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Debtor 1 William J Swiniuch Debtor 2 Kimberly K Swiniuc	ch	Case number (if known)	
Part 11: Give Details Abo	out Your Business or Connections to An	y Business	
27. Within 4 years before you filed business?	d for bankruptcy, did you own a business or have	any of the following connections to any	
A member of a limited  A partner in a partners  An officer, director, or  An owner of at least 56	managing executive of a corporation % of the voting or equity securities of a corporation		
Bill's Painting	Describe the nature of the business painting/snowplowing	Employer Identification number Do not include Social Security number or ITIN	
Business Name	Name of accountant or healthcome	EIN:	
Number Street	Name of accountant or bookkeeper	Dates business existed	
		From To	
City State ZIP Cod	de		
28. Within 2 years before you file all financial institutions, credi	d for bankruptcy, did you give a financial stateme itors, or other parties.	ent to anyone about your business? Include	
✓ No ✓ Yes. Fill in the details below	w.		

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Debtor 1 Debtor 2	William J Swiniuch Kimberly K Swiniuch	Case number (if known)
Part 12	Sign Below	
that answe	ers are true and correct. I understand	cial Affairs and any attachments, and I declare under penalty of perjury at making a false statement, concealing property, or obtaining money or case can result in fines up to \$250,000, or imprisonment for up to 20 years,
	liam J Swiniuch J Swiniuch, Debtor 1 06/21/2018	X /s/ Kimberly K Swiniuch Kimberly K Swiniuch, Debtor 2  Date
Did you at	tach additional pages to Your Statem	of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
✓ No ☐ Yes		
Did you pa	ay or agree to pay someone who is no	n attorney to help you fill out bankruptcy forms?
✓ No ☐ Yes. N	Name of person	Attach the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).
		Declaration, and Signature (Official Form 119).

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Fill in this info				
	ormation to i	dentify your case	:	
	William	J	Swiniuch	
	First Name	Middle Name	Last Name	
Debtor 2	Kimberly	K	Swiniuch	
(Spouse, if filing)	First Name	Middle Name	Last Name	
Case number (if known)			DISTRICT OF ILLINOIS	☐ Check if this

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Hold Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below.						
	Identify the creditor and the property that is collateral			What do you intend to do with the property that secures a debt?		Did you claim the property as exempt on Schedule C?	
	Creditor's name:	Capital One Auto Finance		Surrender the property. Retain the property and redeem it.		No Yes	
	Description of property securing debt:	2010 Dodge Ram		Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:			

#### Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

None.

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Debtor 1 William J Swiniuch Debtor 2 Kimberly K Swiniuch		Case number (if known)		
Part 3:	Sign Below			
	penalty of perjury, I declare that I h al property that is subject to an ur	•	ny property of my estate that s	secures a debt and
	liam J Swiniuch J Swiniuch, Debtor 1	 <b>/s/ Kimberly K Swiniu</b> Kimberly K Swiniuch, Del		
	06/21/2018 MM / DD / YYYY	Date 06/21/2018 MM / DD / YYYY	-	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
   Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liqudation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### Chapter 7: Liquidation

	\$75	filing fee administrative fee trustee surcharge
+		
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

+		filing fee administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee

\$75 administrative fee

\$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

### Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

# Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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#### **UNITED STATES BANKRUPTCY COURT** NORTHERN DISTRICT OF ILLINOIS **CHICAGO DIVISION (EASTERN)**

In re	William J Swiniuch	Case No	
	Kimberly K Swiniuch		
		Chapter :	7

		<u>-</u>
	DISCLOSURE OF COMPENSATION OF ATTOR	RNEY FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the that compensation paid to me within one year before the filing of the petition in b services rendered or to be rendered on behalf of the debtor(s) in contemplation is as follows:	ankruptcy, or agreed to be paid to me, for
	For legal services, I have agreed to accept	\$1,785.00_
	Prior to the filing of this statement I have received	\$35.00
	Balance Due	<b>\$1,750.00</b>
2.	The source of the compensation paid to me was:	
	☑ Debtor ☐ Other (specify)	
3.	The source of compensation to be paid to me is:	
	✓ Debtor  ☐ Other (specify)	
4.	I have not agreed to share the above-disclosed compensation with any other associates of my law firm.	er person unless they are members and
	☐ I have agreed to share the above-disclosed compensation with another per associates of my law firm. A copy of the agreement, together with a list of the compensation, is attached.	•
5.	In return for the above-disclosed fee, I have agreed to render legal service for a	ll aspects of the bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor	r in determining whether to file a petition in

- bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

POST PETITION AMENDMENTS
RESCHEDULING OF THE 341 MEETING
SERVICES REQUESTED AFTER DISCHARGE AND/OR DISMISSAL
REPRESENTATION OF THE DEBTOR IN ADVERSARY PROCEEDINGS

#### **CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

06/21/2018 /s/ Kenneth S. Borcia

Date Kenneth S. Borcia

Kenneth S. Borcia & Associates 1117 S. Milwaukee., Suite A-3 P.O. Box 447

Libertyville, IL 60048

Phone: (847) 634-8800 / Fax: (847) 634-8932

Bar No. 3125988